		Complete if Known			
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	STATEMENT BY APPLICANT			First Named Inventor	Peter R. Horsfall
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			s necessary)	Examiner Name	O. Akintola
Sheet	1	of	1	Attorney Docket Number	E3331.0525

	U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (<i>if known</i>)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		

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		NON PATENT LITERATURE DOCUMENTS	
Examiner Initials	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²

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